FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |           |  |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |  |
| hours per response:      | 0.5       |  |  |  |  |  |  |  |  |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

|   |   |   |           |         | _                                 |  |  |       |   |  |                      |   |                    |                       |   |  |   |  |   |  |  |
|---|---|---|-----------|---------|-----------------------------------|--|--|-------|---|--|----------------------|---|--------------------|-----------------------|---|--|---|--|---|--|--|
| 1. Name and Address of Reporting Person*                      |   |   |           |         |                                   | 2. Issuer Name and Ticker or Trading Symbol KELLY SERVICES INC [ KELYA ] |  |       |   |  |                      |   |                    |                       | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |   |  |   |  |  |
| <u>Corona George S</u>  |   |   |           |         |                                   |  |  |       |   |  |                      |   |                    |                       |   | Direc  | ctor  | 10%  | Owner   |  |  |
| (Land) (Final) (Alidda)                                       |   |   |           |         |                                   | Date of Earliest Transaction (Month/Day/Year)                            |  |       |   |  |                      |   |                    |                       | X   | Offic<br>belov   | er (give title<br>w)  | Other<br>below   | (specify<br>)   |  |  |
| (Last) (First) (Middle)                                       |   |   |           |         |                                   |  | 07/01/2015   |       |   |  |                      |   |                    |                       |   |  | Executive   | VP & COO   |   |  |  |
| 999 WES   | ST BIG BE   | AVER ROAD   |           |         |                                   |  |  |       |   |  |                      |   |                    |                       |   |  |   |  |   |  |  |
| (Charan)  |   |   |           |         |                                   |  | 4. If Amendment, Date of Original Filed (Month/Day/Year)                     |       |   |  |                      |   |                    |                       |   | 6. Individual or Joint/Group Filing (Check Applicable Line)                                      |   |  |   |  |  |
| (Street)<br>TROY  | M   | r /   | 18084     |         |                                   |  |  |       |   |  |                      |   |                    | ١٢                    | X   | Forn   | n filed by One  | e Reporting Per  | son   |  |  |
| TROY MI 48084   |   |   |           |         |                                   |  |  |       |   |  |                      |   |                    |                       | Λ   |  | ,   | e than One Re  |   |  |  |
| (City)  | (C+   | ate) (  | Zin)      |         |                                   |  |  |       |   |  |                      |   |                    |                       |   | Pers   |   | e man One Ke   | Jording   |  |  |
| (City)  | (51   | ate) (.   | Zip)      |         |                                   |  |  |       |   |  |                      |   |                    |                       |   |  |   |  |   |  |  |
|   |   | Tabl  | e I - Nor | n-Deriv | ative                             | Se   | curiti   | es Ac | quire   | d, Dis   | sposed o             | of, o   | r Ber              | nefici                | ally (  | Owne   | ed  |  |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |   |   |           |         |                                   | Execution  |  |       | Cod   | Transaction Disposed Of (D) (I Code (Instr. 5) |                      |   | cquire<br>)) (Inst | d (A) or<br>r. 3, 4 a | and Securi<br>Benefi  |  | icially<br>d Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
|   |   |   |           |         |                                   |  |  |       | Cod   | e v  | Amount               |   | (A) or<br>(D)      | Price                 |   | Transa   | action(s)<br>3 and 4)   |  | (3 4)   |  |  |
| Class A Common Stock, Par Value \$1                           |   |   |           |         | 07/01/2015                        |  |  |       |   |  | 6,715                | 5   | D                  | \$15.65               |   | 2  | 18,736  | D  |   |  |  |
|   |   | Та  |           |         |                                   |  |  |       |   |  | osed of,<br>onvertil |   |                    |                       |   | vned   |   |  |   |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | cise (Month/Day/Year) if any (Month/Day/Year) ive |           |         | Transaction<br>Code (Instr.<br>8) |  | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |       | 6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable  Expiration Date |  |                      | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4)  Amoun<br>or<br>Numbe<br>of<br>Title Shares |                    | ı .                   |   | 9. Number of derivative Securities Seneficially Owned Following Reported Transactions (Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |  |  |

Explanation of Responses:

 George S Corona
 07/02/2015

 by Wendy Lauzano-Hertz,
 07/02/2015

Attorney-in-Fact

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.